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990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2015

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	calend	lar year 2015 or tax	k ye	ar beginning				, 20	15, a	nd endin	9		, 20	
——— Na	ame of f	foundation			-						A Employer	identification number		
R	OBERI	MCLEAN FOUN	DA	TION TRUST							46-7026	896		
		and street (or PO box			elivered to	o stree	t address)		Ro	om/suite		number (see instructions)	
		ARK STREET					,				(973)74	•	•	
		vn, state or province, c	oun	try, and ZIP or fore	ion postal	l code			1			on application is pending	abaak bara	►X
	•	AIR, NJ 0704		-,,	J						Cirexempu	on application is pending	, check here	
		all that apply:	Ī	Initial return		П	Initial return	of a former public of	chant	v	D. 1. Foreigi	n organizations, check he	ne	▶□
			М	Final return		Н	Amended re	•		• •		, organization of onlocking		· Ш
			Н	Address chang	re.	Н	Name chang					n organizations meeting t		▶ □
Н (Check t	type of organization	L			1(c)(3		ate foundation		-	1	here and attach computat		. С
Ϊ,	1	on 4947(a)(1) none:				-(-)(-		taxable private four	odatic	าก		foundation status was terr 07(b)(1)(A), check here		
 I F		rket value of all ass				ountir	ng method	X Cash	\neg	Accrual				
		ear (from Part II, co					(specify)	[23] 000	′	1001001		idation is in a 60-month te tion 507(b)(1)(B), check l		▶ □
	ine 16)		(0	_			e on cash basis)			under sec	,0011 001 (b)(1)(b), criccit	ioic	ــا
2 "	110 10)	Analysis of R	lev					on odon basis)			<u> </u>		(d) Diobus	comonto
		amounts in columns			_			(a) Revenue and expenses per	d	(b) Net	investment	(c) Adjusted net	(d) Disburi	ıtable
		the amounts in colur				·, ·	7	books		ìíın	come	income	purpo: (cash bas	
(30)	1	Contributions, gifts		`	··-	ch ech	nedule)				1 . (1)		(COORT DO	
3	2	Check ► X of the						to in properties for the first section		e :: :::::::::::::::::::::::::::::::::				i i
ENVELOPE FORTHARK DATE	3	Interest on savings								10 TH 25 1				1.00 A
	,	Dividends and inter								 -				
	5a	Gross rents · · ·											List traffic are used	
29 28	b	Net rental income of				• • •			. Pr	4 - 4, 6				
$\overline{}$	l	Net gain or (loss) fr		·	ot on line	0.10								
0CT 30	6a				IOL OIT IIIR	e 10								
_ E	b	Gross sales price for all a Capital gain net inc			luna 2\									3
	7											<u> </u>		
~	8	Net short-term cap Income modificatio												* # 7 # 7
2017	9				1	• • •							-	
~	_10a	Gross sales less returns a Less Cost of good			_									
	b	Gross profit or (loss												12
	11	Other income (atta		·					\dashv	_	3			
	12	Total. Add lines 11		•										
	13		_						0		0			
g	14	Compensation of o Other employee sa									-			
sessuec	15	Pension plans, em		•									 	
	40-	Legal fees (attach												
Ä	16a b	Accounting fees (at									_			
ę		Other professional											 	
難	47	Interest							-+		RE	CEIVED O	ļ	
Str	40	Taxes (attach sche									<u></u>			
Ž	40	Depreciation (attac			•						SI NUV	© 2 2017 S	_	
ج	20	Occupancy · · ·									SI MAY	10 Z ZUIT 10		
A	24	Travel, conference									1	·		
달.	*21	Printing and publication							-	-	GG	DEN. UT	 	
е 6	22	Other expenses (at											<u> </u>	
:	23	Total operating ar											 	
ව		Add lines 13 through			-			ļ			•			•
ď	10a b c 17 18 19 20 21 22 23 23 25	Contributions, gifts							0		0		 	0
J	26								0					0_
_		Total expenses an			Add line	5 Z4	and 25 ·		0		0			0
		Subtract line 26 fro			nd distr		nante							
		Excess of revenu							0					
	p _Q	Net investment in									0			
	ı C	Adjusted net inco	т	, (ii riegauve, ent	CI -U-)						í.	l (3.3

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (201)

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2	68	96	μ	'aae

		Balance Sheets Attached schedules and amounts in the description column	Beginning of year		u or year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less, allowance for doubtful accounts		<u> </u>	
	4	Pledges receivable		100	
	7	Less allowance for doubtful accounts		6	
	_				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		·	
	7	Other notes and loans receivable (attach schedule)		and the second of the second o	
	<u> </u>	Less allowance for doubtful accounts			
Assets	8	Inventones for sale or use			
28	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U S and state government obligations (attach schedule)			
	ь	Investments - corporate stock (attach schedule)			
	c				
	11	Investments - land, buildings, and equipment basis		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Less accumulated depreciation (attach schedule)		<u> </u>	
	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·			
	13	Investments - other (attach schedule)			
	14	Land buildings and accomment books.			
	1*				
	4-	Less accumulated depreciation (attach schedule)	<u> </u>		
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item l)	0	<u> </u>	0 0
	17	Accounts payable and accrued expenses			
10	18	Grants payable			
Liabilities	19	Deferred revenue			
Ę	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable (attach schedule)			
J	22	Other liabilities (describe)			
	23	Total liabilities (add-lines 17 through 22)	0		0
		Foundations that follow SFAS 117, check here · · · · · ▶ 🏻			
es S	İ	and complete lines 24 through 26 and lines 30 and 31.	l		
alances	24	Unrestricted			· · · · · · · · · · · · · · · · · · ·
쿌	25	Temporanly restricted			
	26	Permanently restricted			
밑	İ	Foundations that do not follow SFAS 117, check here			-
Ī		and complete lines 27 through 31.			
or Fund B	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	 		
Š	29	Retained earnings, accumulated income, endowment, or other funds			
As	30	Total net assets or fund balances (see instructions)	0		0
Net Assets	l .	Total liabilities and net assets/fund balances (see	U		
Z	31	•			
		instructions) Analysis of Changes in Net Assets or Fund Balance	0		0
4	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3			
1		of-year figure reported on pnor year's return)			1
•		or-year figure reported on prior years return)			
				-	
		r increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			
_		reases not included in line 2 (itemize)			5
<u>6</u>		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	iumn (b), line 30		5 200 PF (2045)
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Capital Gains	and Losses for Tax on Inve	stment Income			
(a) List and describ 2-story brick ware	be the kind(s) of property sold (e g , real e shouse, or common stock, 200 shs MLC C	state, Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
b					
_c					
d			 		
θ	 		<u> </u>		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expen			ain or (loss) (f) minus (g)
a b		 			
c					
d				·	
9					
Complete only for assets show	ving gain in column (h) and owned by	the foundation on 12	2/31/69		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(i) Adjusted basis (k) Excess of		col (k), but no	tol (h) gain minus ot less than -0-) or (from col (h))
a					
b					
С					
d					
е					
2 Capital gain net income or (ne	(capital loss)	so enter in Part I, line enter -0- in Part I, line	7 1	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6)			
If gain, also enter in Part I, line	8, column (c) (see instructions). If (lo	oss), enter -0- ın			
				3	
Qualification U	nder Section 4940(e) for Re	educed Tax on	Net Investme	nt Income	
(For optional use by domestic priva	ate foundations subject to the section	4940(a) tax on net ii	nvestment income	;)	
If section 4940(d)(2) applies, leave	this nart blank				
	·				
	ection 4942 tax on the distributable a		the base period?		Yes □X No
	ualify under section 4940(e) Do not c				
	n each column for each year, see the	instructions before	making any entrie	<u>s</u>	
(a) Base penod years Calendar year (or tax year beginning	g in) Adjusted qualifying distribution	s Net value of n	(c) onchantable-use as:		(d) stribution ratio divided by col (c))
2014					
2013					
2012					
2011					
2010					
				1 1	
, , ,				2 0	.0
_	e 5-year base period - divide the tota				
number of years the foundation	n has been in existence if less than 5	years		3 0	.0
4 Enter the net value of nonchar	rtable-use assets for 2015 from Part X	X, line 5		. 4	
					
5 Multiply line 4 by line 3 · · ·				. 5	0_
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)	· · · · · · · · · · · ·		6	
·7 Add lines 5 and 6 · · · · ·				. 7	0
8 Enter qualifying distributions from	om Part XII, line 4			. 8	
	nan line 7, check the box in Part VI, li				
Part VI instructions		·			

Form	990-PF (2015) ROBERT MCLEAN FOUNDATION TRUST 46-	7026896	i	Page 5
	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			T
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	1	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	1	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_	3	$\frac{1}{X}$
	Website address ► N/A	L		1-21
14		73-744	-7040	
•		7042	- 7040	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here	7042		▶ □
	and enter the amount of tax-exempt interest received or accrued during the year	1		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	ــــــــــــــــــــــــــــــــــــــ	Yes	No
	over a bank, securities, or other financial account in a foreign country?		6	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		0	
	the foreign country	1.00		
	Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Vaa	T N=
40	• • • • • • • • • • • • • • • • • • • •		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
		No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
		No		
		No		
		No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1		
	the benefit or use of a disqualified person)?	NO		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a penod after			
	termination of government service, if terminating within 90 days)	No		
Þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	• •	b	
	Organizations relying on a current notice regarding disaster assistance check here · · · · · · · · · · ▶ ☐			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
_	were not corrected before the first day of the tax year beginning in 2015?	_·_· <u></u> 1	C-	_X
2-	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	·		
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?	No		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			لويح
	all years listed, answer "No" and attach statement - see instructions)	2	b	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u></u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	No		
þ	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015)	3	b	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	• 4	а	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	1 4	h ì	ιγ

Form	990-PF (2015) ROBERT MCLEAN FOUND						46-702		Page 6
	Statements Regarding Activities	s for	Which For	n 4720	May Be	Requir	red (continued))	
5a	During the year did the foundation pay or incur any arr	ount to				-			
	(1) Carry on propaganda, or otherwise attempt to influ	reuce leá	gislation (section	n 4945(e))? · ·	[Yes X No	•	
	(2) Influence the outcome of any specific public electrons	on (see s	section 4955),	or to can	ry on,	r			
	directly or indirectly, any voter registration drive?		• • • • • • •			• • •]	Yes X No		
	(3) Provide a grant to an individual for travel, study, or					· · · · [Yes X No	j	
	(4) Provide a grant to an organization other than a ch		-			_			
	section 4945(d)(4)(A)? (see instructions)					• • • [Yes X No		
	(5) Provide for any purpose other than religious, char		-	or educ	atronal	_			
	purposes, or for the prevention of cruelty to childre					L	Yes <u>[X]</u> No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans		-				ın		
	Regulations section 53 4945 or in a current notice reg	•		•	,			5b	
	Organizations relying on a current notice regarding dis					• • • •	▶ 📙		
C	If the answer is "Yes" to question 5a(4), does the foun		•			r	٦., ٢٦.,		
	because it maintained expenditure responsibility for th	•				٠٠٠ ا	Yes No		
C -	If "Yes," attach the statement required by Regulations		` ,						
6a	Did the foundation, during the year, receive any funds,	-	•			٦	T		
b	on a personal benefit contract?						_ Yes X No	0.5	
	Did the foundation, during the year, pay premiums, dir If "Yes" to 6b, file Form 8870	ectly or ii	ndirectly, on a p	ersonai	benefit contr	act?		6b	X
7a	At any time during the tax year, was the foundation a p	arty to a	prohibited tox	abaltar t	ranacation?	Г	Yes X No		
	If "Yes," did the foundation receive any proceeds or ha	•	•			tion?	Yes [X] No	7b	
	Information About Officers, Dire						. Highly Paid		ees.
	and Contractors	,	,				, g, . a		,
1 L	ist all officers, directors, trustees, foundation mana	gers an	d their compe	nsation	(see instruc	tions).			
		(b) Title	e, and average	(c) Co	ompensation	(d)	Contributions to	(e) Expens	se account,
	(a) Name and address		rs per week ed to position		not paid, iter -0-)		oyee benefit plans erred compensation	other all	owances
JOH	N F HOLZINGER JR.	TRUST	EE						
101	PARK STREET, MONTCLAIR, NJ 07042	<u> </u>	0.00	<u> </u>	0		0		0
ANNI	E VAN DYKE	TRUST	EE						
101	PARK STREET, MONTCLAIR, NJ 07042	<u> </u>	0.00		0_		0		0
KATI	ileen Hamilton	TRUST	EE						
	PARK STREET, MONTCLAIR, NJ 07042		0.00	<u> </u>	0		0		0_
	RA MAMADOPOLOUS	TRUST							
	PARK STREET, MONTCLAIR, NJ 07042	45.00.45	0.00		0	4:	0		
	compensation of five highest-paid employees (other NONE."	tnan tne	ose included (on iine 1	- see instru	ctions).	if none, enter		
	NONE.		I		Τ		(d) Contributions to		
	(a) Name and address of each employee paid more than \$50	.000	(b) Title, and a hours per w		(c) Comper	nortea	employee benefit	(e) Expens	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		devoted to po		(c) Comper	Sauon	plans and deferred compensation	other allo	wances
NON	<u></u>		 						
	_		Ì		}	,			
					İ	ŀ			
			ļ						
					}	7	-		
			Ĺ		<u> </u>				
Total	number of other employees paid over \$50,000	· · · ·	· · · · · · ·	· · · · ·			· · · · · · >		0_
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Form 990-PF (2015) ROBERT MCLEAN FOUNDATION TRUST

Form 990-PF (2)			026896 Page 7
	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Pa	
3 Five high	est-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
			
Total number of	others receiving over \$50,000 for professional services		
	Summary of Direct Charitable Activities		
List the foundate organizations ar	Expenses		
1			
2			
3			
4			
	Summary of Program-Related Investments (see instruc	tions)	
Describe the two	largest program-related investments made by the foundation during the tax year on lin		Amount
-1		os rangz	Amount
2			
All other program	related investments. See instructions		
•			

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	see instructions.)	toundations	,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
ď	Total (add lines 1a, b, and c)	1d	0
0	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for chantable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	oundations	
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
b	Income tax for 2015. (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	0
	Qualifying Distributions (see instructions)	· 	··
	addinying bisdibuduis (see ilistiuctions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
8	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0
b	Program-related investments - total from Part IX-B	_1b	
-2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes · · · · · · · · · · · · · · · · · ·	2	
3	Amounts set aside for specific chantable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation	
	qualifies for the section 4940(e) reduction of tax in those years		

	Olidistributed income (see msuc	1			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015
	line 7			<u> </u>	0
2	Undistributed income, if any, as of the end of 2015			,	
а	Enter amount for 2014 only				
b	Total for prior years,				
3	Excess distributions carryover, if any, to 2015				!
а	From 2010				!
b	From 2011				
C	From 2012				
d	From 2013				
0	From 2014				
f	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election			.,	
	required - see instructions)				
đ	Applied to 2015 distributable amount				
0	Remaining amount distributed out of corpus · · ·				
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	<u></u>			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 ·				
b					
	line 4b from line 2b · · · · · · · · · · · · · · · · · ·				
С	Enter the amount of prior years' undistributed				
_	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed				
đ	Subtract line 6c from line 6b Taxable				•
	amount - see instructions				
0	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount - see				
f	Undistributed income for 2015. Subtract lines			;	
•	4d and 5 from line 1. This amount must be			6	
	distributed in 2016				_
7	Amounts treated as distributions out of corpus				0
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a · · · · · ·				
0	Analysis of line 9				
а	Excess from 2011				
b	Excess from 2012 · · · ·				
С	Excess from 2013				
d	Excess from 2014 · · · ·				
9	Excess from 2015 · · · ·				

EEA

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4-	If the foundation has received a ruling or determination letter that it is a private operating						
1a	foundation, and the ruling is effective for 2			ıg			
ь	Check box to indicate whether the founda	•	•	od in eacher	4942(j)(3) or 4	1043(1)(E)	
2a	Enter the lesser of the adjusted net	Tax year	Ing loundation describe				
	income from Part I or the minimum		(b) 2044	Pnor 3 years	111 2012	(e) Total	
	investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012		
ь	85% of line 2a		 		 		
			 	<u> </u>	 		
С	Qualifying distributions from Part XII, line 4 for each year listed	· 				·	
d	Amounts included in line 2c not used directly for active conduct of exempt activities •						
0	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the alternative test relied upon						
a	"Assets" alternative test - enter (1) Value of all assets						
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
Þ	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c	"Support" alternative test - enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section						
	512(a)(5)), or royalties) · · · ·						
	(2) Support from general public and 5 or more exempt organizations as provided in						
	section 4942(j)(3)(B)(iii) · · · · (3) Largest amount of support from				 		
	an exempt organization · · ·						
	(4)-Gross investment income · · ·			<u> </u>			
	Supplementary Informat			e foundation had	d \$5,000 or more i	n assets at	
	any time during the year		ns.)				
1	Information Regarding Foundation Ma		+ 00/ -6#				
а	List any managers of the foundation who before the close of any tax year (but only	f they have contributed mor	e than 2% of the total c ed more than \$5,000) (ontributions received t See section 507(d)(2)	by the foundation		
	service the close of any tax year (ser only	water continued	oa more man 4 0,000) (, Dec 3000011 307 (4)(2).	•/		
<u>.</u>		1004					
Ь	List any managers of the foundation who ownership of a partnership or other entity				portion of the		
	2 or a partitioning of other entity	, son the loundar	iida a 1070 di gicat	o. merest			
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Program	 ms:			
	Check here ▶ ☐ if the foundation only				see not accomb		
	unsolicited requests for funds. If the foun other conditions, complete items 2a, b, c	dation makes gifts, gra					
а	The name, address, and telephone number		of the person to whom a	applications should be	addressed		
							
b	The form in which applications should be	submitted and inform	ation and materials the	y should include			
С	Any submission deadlines				/		
d	Any restrictions or limitations on awards, factors.	such as by geographi	cal areas, chantable fie	lds, kinds of institution	s, or other		

	Supplementary Information (contin	ued)			<u>, </u>
3	Supplementary Information (contin Grants and Contributions Paid During the	Year or Approved	for Future P	ayment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
		or substantial contributor			
a	Name and address (home or business) Paid during the year	or substantial contributor	recipient		
	Total			≯ 3a	
b	Approved for future payment				

Total

3b

_	Allalysis of income-Producing A			T =		
Ent	ter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue	code	7 (1.104)	Exercision code	7 41104711	
	a		 	<u> </u>		
	b		<u> </u>			
	c					
	d	ļ		ļ		
	6	<u> </u>	<u> </u>	}		
	East and contracts from advernment appropri					
	g Fees and contracts from government agencies · · ·					
	Membership dues and assessments	<u></u>	<u> </u>	<u> </u>]
3	Interest on savings and temporary cash investments .			<u> </u>		
4						
5	Net rental income or (loss) from real estate					
	a Debt-financed property	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
	b Not debt-financed property	ļ		 		ļ .
	Net rental income or (loss) from personal property · · ·	ļ	 	ļ		
	Other investment income	 		<u> </u>		.
	Gain or (loss) from sales of assets other than inventory	 -		ļ		
	Net income or (loss) from special events					,
	Gross profit or (loss) from sales of inventory	<u> </u>			· · · · · · · · · · · · · · · · · · ·	<u> </u>
11	Other revenue a			ļ		:
	b			 		
	c	<u> </u>	}			
	d	 	ļ	ļ		<u> </u>
	•		ļ			
	Subtotal Add columns (b), (d), and (e)		L	<u> </u>		L
			• • • • • • • • • • • • • • • • • • • •		· · · · · · 13	
(36	ee worksheet in line 13 instructions to verify calculations) Relationship of Activities to the	Accompl	ichment of Eva	mpt Burno	200	
	Explain below how each activity for which inco					
L	ine No. accomplishment of the foundation's exempt pu					
	accomplishment of the foundation's exempt pu	irposes (otne	er than by providing to	unas for such p	urposes) (See instruct	ions)
_						
_						
						
						
						···
						
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			- 			
						
						
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EE/	<u> </u>					Form 990-PF (2015)

Form 990-PF (2015) ROBERT MCLEAN FOUNDATION TRUST 46-7026896 P
Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the or	ganization direc	itly or indirectly engag	ge in any of t	ne tollowing with	n any other org	anization desc	cribed				Yes	No
	in section	501(c) of the C	ode (other than section	on 501(c)(3)	organizations) c	or in section 52	7, relating to p	oolitical				,-	ľ
	organizati	ons?											
	-		ng foundation to a no	oncharitable	exempt organiza	ation of							
	(1) Cash		· · · · · · · · · · ·								1a(1)		Х
	· ·										1a(2)		X
	Other tran										-(-)		
			oncharitable exempt	ornanizatior	1						1b(1)	Ţ	Х
	• •		from a noncharitable	-							1b(2)	 	X
	` '										<u> </u>	├──	X
	•		uipment, or other ass								1b(3)	├	
	• •		ngements								1b(4)		X
	• •	· -	tees · · · · · ·								1b(5)	<u> </u>	X
	,		ces or membership o	_	•					• • •	1b(6)		X
C	Sharing of	f facilities, equip	ment, mailing lists, of	ther assets,	or paid employe	es · · · ·		• • • • •		• • •	1c	L	<u> X</u>
d	If the ansv	ver to any of the	e above is "Yes," com	nplete the fol	lowing schedule	Column (b) s	hould always:	show the fa	air ma	arket			
	value of th	ne goods, other	assets, or services g	liven by the r	eporting foundate	tion If the four	idation receive	ed less tha	n fair	market	i		
	value in a	ny transaction o	r sharing arrangeme	nt, show in c	olumn (d) the va	alue of the goo	ds, other asse	ts, or serv	ices r	eceive	d		
(a) Lın	e no (b) A	mount involved	(c) Name of none	charitable exe	mpt organization	(d) De:	scription of trans	sfers, transa	ctions	, and sh	aring arra	angeme	nts
				· · · · ·									
													
						- 							
						+							
	 -												
	_+												
													
					·								
			<u> </u>										
		-	or indirectly affiliated of the code (other			•	organizations					s X	
		omplete the folk		man section	ou i(c)(o)) oi in	3CUIUN 32/ /					∐ Ye	• <u> </u>	No
		<u>-</u>			n) Type of array			(a) D=: -					
		a) Name of organ	ization	(b) Type of organization				(c) Description of relationship					
							 						
							 			_			
	-			 			 -						
				 			 						
													
0:-	correct a	enaities of perjury, I d and complete Declar	declare that I have examine ration of preparer (other that	an taxpayer) is b	ased on all information	schedules and sta on of which prepare	itements, and to th ir has any knowled	te best of my l age	KNOWIE	age and t	oellet, it is t	rue,	
Sig	1 -	1 1/11	MAN	1	into ela	- 1	01 .	11	٦,	May the I	RS discuss	this reti	um
Нег		TOMMU U	por	L	W/26/1/	1 tud	hotzof	2910	La	with the p (see inst	reparer sh		
	Sign	ature of officer or tru	stee		Date '	Title				Jen Bec	<u>' </u>	Yes	X No
		Pnnt/Type prepare	er's name	Preparer	s signature	//1 .	Date	C	Check	X f	PTIN		
Paid	d .	Karen S A	lviggi	911	rens!	LUISE	10-26-20	17 s	elf-emp	loyed	P0133	6255	
Pre	parer	Firm's name	Karen S Alv	/1ggi/	/	11		Firm's EIN	>				
Use Only		Firm's address	> 323 Masters		 E			Phone no					
	• • · · · · y		Ewing NJ 08						609	-771-	4072		
		'							333	.,	Farm 01	NA DE /	(2045)